

Fay Sharpe Fagan Minnich & McKee, LLP  
1100 Superior Avenue, Seventh Floor  
Cleveland, Ohio 44114-2579  
216.861.5582  
[www.FaySharpe.com](http://www.FaySharpe.com)

# Fay Sharpe

WE PROTECT YOUR IDEAS.

Date:	October 24, 2006	Total Pages:	10 (including cover sheet)
To:	U.S. Patent Office		RECEIVED
Attn:	Examiner D. WHITE – Art Unit 3745		GENTRAL FAX CENTER
Facsimile No.:	(571) 273-8300		OCT 24 2006
From:	Thomas E. Kocovsky, Jr.		
Re:	Ser. No. 10/517,113; Our Ref.: LYBZ 2 00090		

*Please call us immediately at 216.861.5582 or 888.861.5582 if this transmission is incomplete or illegible.*

## COMMENTS

10 pp

1 pp Fax Cover Sheet  
1 pp Form PTO-2028  
2 pp Amendment Transmittal Letter(s)  
6 pp Amendment B

The documents accompanying this facsimile transmission include information from the firm of Fay Sharpe Fagan Minnich & McKee, LLP that might be legally privileged and/or confidential. The information is intended for the use of only the individual or entity named on this cover sheet. If you are not the intended recipient, any disclosure, copying, or distribution of these documents, or the taking of any action based on the contents of this transmission, is prohibited. If you have received this transmission in error, these documents should be returned to this firm as soon as possible, and we ask that you notify us immediately by telephone so we can arrange for their return to us without cost to you.

L:\HMMMDATA\2006\LYBZ200090.FAX.DOC

PAGE 1/10 \* RCVD AT 10/24/2006 3:17:27 PM [Eastern Daylight Time] \* SVR:USPTO-EFXRF-3/9 \* DNIS:2738300 \* CSID:216 241 1666 \* DURATION (mm:ss):03:26

Oct. 24. 2006 3:15PM Fay Sharpe

RECEIVED  
CENTRAL FAX CENTER

No. 6719 P. 3

OCT 24 2006

AMENDMENT TRANSMITTAL LETTER

Attorney Docket No. LYBZ 2.00090

Serial No.: 10/517,113	Filed: December 3, 2004	Examiner: D. WHITE
Group Art Unit: 3745 Confirmation: 3128	Invention: <b>EVACUATING DEVICE</b>	

To the Commissioner For Patents:

Transmitted herewith is an **AMENDMENT B** in the above-identified application. The fee has been calculated as shown below.

CLAIMS AS AMENDED						
	Claims remaining after amendment		Highest Number Previously Paid For	No. of Extra Claims Present	Rate	Additional Rate
Total Claims	7	Minus	20	-	\$ 50	\$ 0.00
Indep. Claims	4	Minus	3	1	\$200	\$ 200.00

No additional claims fee is required.

An additional fee in the amount of \$ 200.00 is due for an additional independent claim. Payment is authorized to be charged to a Credit Card. The applicants enclose an appropriate form PTO-2038 for this purpose.

Please charge any additional fees or credit overpayment to Deposit Account No. 06-0308. A duplicate copy of this sheet is enclosed.

Applicants hereby request any additional extensions of time that may be necessary and authorize the extension of time fees to be charged to Deposit Account No. 06-0308.

Respectfully submitted,

FAY, SHARPE, FAGAN,  
MINNICH & MCKEE, LLP

Date: 24 Oct 2006

Thomas E. Kocovsky, Jr.  
Reg. No. 28,383  
1100 Superior Avenue  
Seventh Floor  
Cleveland, Ohio 44114-2518  
(216) 861-5582

CERTIFICATE OF FAXING

I hereby certify that these **AMENDMENT TRANSMITTAL LETTER** (x2); **AMENDMENT B**; and **PTO-2038** in connection with U.S. Patent Application Serial No. 10/517,113 are being transmitted to facsimile number (571) 273-8300 on this 24 day of October, 2006.

By: Libby McNulty

RECEIVED  
CENTRAL FAX CENTER

## AMENDMENT TRANSMITTAL LETTER

OCT 24 2006

Attorney Docket No. LYBZ 2 00090

Serial No.:	Filed:	Examiner:
10/517,113	December 3, 2004	D. WHITE
Group Art Unit: 3745 Confirmation: 3128	Invention: <b>EVACUATING DEVICE</b>	

To the Commissioner For Patents:

Transmitted herewith is an AMENDMENT B in the above-identified application. The fee has been calculated as shown below.

CLAIMS AS AMENDED						
	Claims remaining after amendment		Highest Number Previously Paid For	No. of Extra Claims Present	Rate	Additional Rate
Total Claims	7	Minus	20	-	\$ 50	\$ 0.00
Indep. Claims	4	Minus	3	1	\$200	\$ 200.00

No additional claims fee is required.

An additional fee in the amount of \$ 200.00 is due for an additional independent claim. Payment is authorized to be charged to a Credit Card. The applicants enclose an appropriate form PTO-2038 for this purpose.

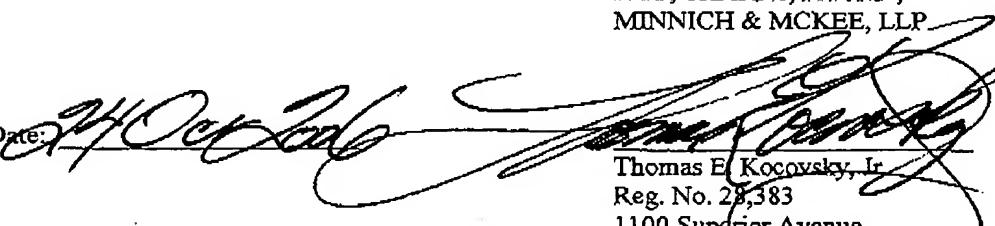
Please charge any additional fees or credit overpayment to Deposit Account No. 06-0308. A duplicate copy of this sheet is enclosed.

Applicants hereby request any additional extensions of time that may be necessary and authorize the extension of time fees to be charged to Deposit Account No. 06-0308.

Respectfully submitted,

FAY, SHARPE, FAGAN,  
MINNICH & MCKEE, LLP

Date:



Thomas E. Kocovsky, Jr.  
Reg. No. 28,383  
1100 Superior Avenue  
Seventh Floor  
Cleveland, Ohio 44114-2518  
(216) 861-5582

CERTIFICATE OF FAXING

I hereby certify that these AMENDMENT TRANSMITTAL LETTER (x2); AMENDMENT B; and PTO-2038 in connection with U.S. Patent Application Serial No. 10/517,113 are being transmitted to facsimile number (571) 273-8300 on this 24 day of October, 2006.

By: Colleen McNeely

RECEIVED  
CENTRAL FAX CENTER

OCT 24 2006

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of ) Examiner: D. WHITE  
 R. ADAMIETZ )  
 Serial No.: 10/517,113 ) Art Unit: 3745  
 Filed: December 3, 2004 ) Confirmation: 3128  
 For: EVACUATING DEVICE )  
 Date of Last Office Action: )  
 July 28, 2006 )  
 Attorney Docket No.: ) Cleveland, OH 44114  
 LYBZ 2 00090 ) October 24, 2006

AMENDMENT B

Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

Dear Sir:

This amendment is responsive to the Office Action of July 28, 2006.

Amendments to the claims are reflected in the listing of claims which begins on page 2.

Remarks begin on page 5.

Certificate of Filing

I certify that this AMENDMENT B in connection with Ser. No. 10/517,113 is being  
 transmitted to facsimile number 571/273-8300 under 37 C.F.R. § 1.8 on the date indicated below.

Date	Signature
October 24, 2006	Hilary M. McNULTY
	Printed Name

10/25/2006 MBINAS 0000003 10517113

L:\HMMMDATA\2006\LYBZ200090.AMN.DOC

01 FC:1201

200.00 0P